



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/728,638
		Filing Date	December 5, 2003
		First Named Inventor	Stephen R. Haddock
		Art Unit	2663
		Examiner Name	not assigned
Total Number of Pages in This Submission	8	Attorney Docket Number	2717P007C2

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	- copy of 1 cited reference
<input checked="" type="checkbox"/> PTO/SB/08	<input type="checkbox"/> CD, Number of CD(s)	- Return Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Basic Filing Fee		
<input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Gregory D. Caldwell, Reg. No. 39,926 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	March 2, 2004

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Annie G. Pearson
Signature	
Date	March 2, 2004



FEET TRANSMITTAL for FY 2004

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT	(\\$)	0.00
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Complete if Known	
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Examiner Name	not assigned
Art Unit	2663
Attorney Docket No.	2717P007C2

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number

Deposit Account Name

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1001	770	2001	385	Utility filing fee
1002	340	2002	170	Design filing fee
1003	530	2003	265	Plant filing fee
1004	770	2004	385	Reissue filing fee
1005	160	2005	80	Provisional filing fee
SUBTOTAL (1)		(\$)		

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
8	20*	= 0	x 18.00 = \$0.00
2	3**	= 0	x 86.00 = \$0.00
Multiple Dependent			

Large Entity		Small Entity	
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1202	18	2202	9
1201	86	2201	43
1203	290	2203	145
1204	86	2204	43
1205	18	2205	9
Claims in excess of 20		Claims in excess of 3	
Independent claims, if not paid		Multiple Dependent claim, if not paid	
**Reissue independent claims over original patent		**Reissue independent claims over original patent	
**Reissue claims in excess of 20 and over original patent		**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$)	

**or number previously paid, if greater. For Reissues, see below

3. ADDITIONAL FEES

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath			
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet			
2053	130	2053	130	Non-English specification			
1812	2,520	1812	2,520	For filing a request for ex parte reexamination			
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action			
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action			
1251	110	2251	55	Extension for reply within first month			
1252	420	2252	210	Extension for reply within second month			
1253	950	2253	475	Extension for reply within third month			
1254	1,480	2254	740	Extension for reply within fourth month			
1255	1,210	2255	605	Extension for reply within fifth month			
1404	330	2401	165	Notice of Appeal			
1402	330	2402	165	Filing a brief in support of an appeal			
1403	290	2403	145	Request for oral hearing			
1451	1,510	2451	1,510	Petition to institute a public use proceeding			
1452	110	2452	55	Petition to revive - unavoidable			
1453	1,330	2453	665	Petition to revive - unintentional			
1501	1,330	2501	665	Utility issue fee (or reissue)			
1502	480	2502	240	Design issue fee			
1503	640	2503	320	Plant issue fee			
1460	130	2460	130	Petitions to the Commissioner			
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)			
1806	180	1806	180	Submission of Information Disclosure Stmt			
8021	40	8021	40	Recording each patent assignment per property (times number of properties)			
1809	770	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))			
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))			
1801	770	2801	385	Request for Continued Examination (RCE)			
1802	900	1802	900	Request for expedited examination of a design application			
Other fee (specify)		IDS		0.00			

* Reduced by Basic Filing Fee Paid

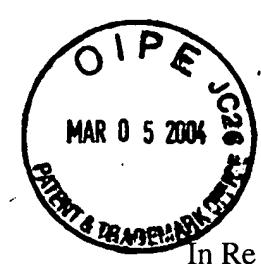
SUBTOTAL (3)

(\$)

0.00

Complete (if applicable)

Name (Print/Type)	Gregory D. Caldwell	Registration No. (Attorney/Agent)	39,926	Telephone	(503) 684-6200
Signature				Date	03/02/04



Docket No.: 2717P007C2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

STEPHEN R. HADDOCK, ET AL.

Application No.: 10/728,638

Filed: December 5, 2003

For: **POLICY BASED QUALITY OF SERVICE**

Art Group: 2663

Examiner: not assigned

INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of IDS Citation Form PTO/SB/08 or PTO-1449, together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed for applications filed after June 30, 2003). This IDS and IDS Citation Form are being submitted within three (3) months of filing of the application. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

Please charge any fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Respectfully submitted,

BLAKELY, SOKOLOFF TAYLOR & ZAFMAN LLP

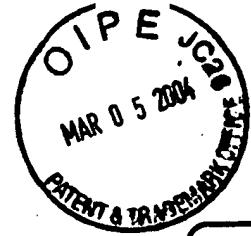
Gregory D. Caldwell, Reg. No. 39,926

Date: March 02, 2004

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I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Annie G. 03-02-04
Annie G. Pearson Date



Substitute for form 1449A/PTO				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Application Number	10/728,638
				Filing Date	December 5, 2003
				First Named Inventor	Stephen R. Haddock
				Art Unit	2663
				Examiner Name	not assigned
				Attorney Docket Number	2717P007C2
Sheet	1	of	1		

NON PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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***Examiner:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

***Applicant's unique citation designation number. *Applicant is to place a check mark here if English language Translation is attached.**

Based on PTO/SB/08B (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (wir) 08/11/2003
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